

SECTION A Provider/Program Information

1. County Name:

2. Provider Name:

3. Contact Person:

4. Today’s Date:

5. Provider ID No.:

6. Telephone No.: (  )

7. Strategy Status: ☐ Existing Services  
☐ New Services

SECTION B Service Populations

Please check (\$) all boxes that apply. Asterisks (\*) denote high-risk categories.

☐ (a) Business and Industry  
☐ (b) Children of Substance Abusers \*  
☐ (c) Civic Groups/Coalitions  
☐ (d) College Students  
☐ (e) Delinquent/Violent Youth \*  
☐ (f) Economically Disadvantaged \*

☐ (g) Elementary School Students  
☐ (h) Employee Groups/Unions  
☐ (i) Fire Professionals  
☐ (j) Gangs  
☐ (k) General Population  
☐ (l) Government/Elected Officials  
☐ (m) Health Professionals  
☐ (n) High School Students  
☐ (o) HIV Infected Persons

☐ (p) Homeowners Associations  
☐ (q) IV Drug Users  
☐ (r) Law Enforcement/Military  
☐ (s) Lesbian/Gay/Bisexual/Transgender  
☐ (t) Local Municipal Agencies  
☐ (u) Middle/Jr High School Students  
☐ (v) Neighborhood Associations  
☐ (w) Older Adults  
☐ (x) Parents/Families

☐ (y) People With Mental Health Problems \*  
☐ (z) Persons Using Substances \*  
☐ (aa) Persons With Physical Disabilities \*  
☐ (bb) Physical/Emotional Abuse Victims \*  
☐ (cc) Pregnant Women/Teens \*  
☐ (dd) Preschool Students  
☐ (ee) Prevention/Treatment Professionals  
☐ (ff) Professional/Trade Associations  
☐ (gg) Religious Groups

☐ (hh) Retailers  
☐ (ii) Runaway/Homeless Youth \*  
☐ (jj) School Dropouts \*  
☐ (kk) Social Service Providers  
☐ (ll) Teachers/Administrators/Counselors  
☐ (mm)Voluntary/Fraternal Community Service  
☐ (nn) Women and Children  
☐ (oo) Youth/Minors  
☐ (pp) Other (specify)

SECTION C Service Delivered

Determine the single most appropriate service description for each activity; for each service delivered, complete the entire row. Enter the number of times the service was provided in the “Frequency” column; enter the number of persons served in the “Number Served” column. These entries must be numeric. Enter A or E in the “Actual/Estimated” column. For C2, C3 and C4, enter in the demographic breakdown; the “Totals” should match the “Number Served.”

C1 Services Requiring Demographics	Frequency	Number Served	A=Actual E=Est.	C2 Race/Ethnicity									C3 Age									C4 Gender			
				(a) White, Not Hispanic	(b) Asian or Pacific Islander	(c) Hispanic/ Latino	(d) Native Am./ Alaska Native	(e) African American	(f) Multiracial/ Multiethnic	(g) Other	Specify	TOTAL	(a) Under 5	(b) 5 - 9	(c) 10 - 12	(d) 13 - 15	(e) 16 - 18	(f) 19 - 25	(g) 26 - 55	(h) Over 55	TOTAL	(a) Male	(b) Female	(c) Other	TOTAL
(a) Brochures/Pamphlets Disseminated																									
(b) Conferences/Fairs																									
(c) Health Fairs/Promotions																									
(d) Newsletters Disseminated																									
(e) Resource Directories Disseminated																									
(f) Speaking Engagements																									
(g) Other (specify)																									

C5 Services Not Requiring Demographics	Frequency		Frequency
<input type="checkbox"/> (h) A/V Materials Developed—Original		<input type="checkbox"/> (p) Newsletters Developed—Original	
<input type="checkbox"/> (i) A/V Materials Disseminated		<input type="checkbox"/> (q) Printed Materials Developed (other than above)	
<input type="checkbox"/> (j) Brochures/Pamphlets Developed		<input type="checkbox"/> (r) Printed Materials Disseminated	
<input type="checkbox"/> (k) Clearinghouse/Information Resource Center		<input type="checkbox"/> (s) Public Service Announcements Developed—Original	
<input type="checkbox"/> (l) Curricula Developed—Original		<input type="checkbox"/> (t) Public Service Announcements Aired	
<input type="checkbox"/> (m) Curricula Disseminated		<input type="checkbox"/> (u) Resource Directories Developed—Original	
<input type="checkbox"/> (n) Media Campaigns Developed		<input type="checkbox"/> (v) Telephone Information Service Calls	
<input type="checkbox"/> (o) Media Campaigns Conducted			

SECTION D Where Services Occurred

Please check (\$) all that apply.

☐ (a) Alternative Schools  
☐ (b) Community At Large  
☐ (c) Community Center  
☐ (d) Criminal Justice System  
☐ (e) Faith Center  
☐ (f) Health Center/Clinic

☐ (g) Hospital  
☐ (h) Parks/Recreation  
☐ (i) Public Housing  
☐ (j) Residential Treatment  
☐ (k) School  
☐ (l) Street Outreach  
☐ (m) Transitional Housing

☐ (n) Treatment Facility  
☐ (o) University/College  
☐ (p) Work Place  
☐ (q) Youth Clubs/Center  
☐ (r) Other (specify)